

CLAIMS ONLY

Application Number

9/580343

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2			/			
3			/			
4			/			
5			/			
6			/			
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44			/			
45			/			
46			/			
47			/			
48			/			
49			/			
50			/			
Total Indep			4			
Total Depend			114			
Total Claims			118			

II

CLAIMS ONLY							Application Number 9/580 343		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	
/ 01								/ 51				
/ 02								/ 52				
/ 03								/ 53				
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/ 48								/ 98				
/ 49								/ 99				
/ 50								200				
Total								Total				
Indep								Indep				
Total								Total				
Depend								Depend				
Total								Total				
Claims								Claims				